

December 6, 2004

MEMORANDUM

TO: State Public Health Veterinarians
State Epidemiologists
State Veterinarians
Other Parties Interested in Rabies Prevention and Control

FROM: Mira J. Leslie, D.V.M., M.P.H, Co-Chair
Compendium of Animal Rabies Prevention and Control Committee

SUBJECT: *Compendium of Animal Rabies Prevention and Control, 2005*

The National Association of State Public Health Veterinarians (NASPHV) is pleased to provide the 2005 revision of the *Compendium of Animal Rabies Prevention and Control* for your use and for distribution to practicing veterinarians and officials in animal control, public health, wildlife management and agriculture in your state. This cover memo summarizes the changes that were made to the document this year.

COMPENDIUM CHANGES

The section Principles of Rabies Prevention and Control (formerly Part II) is now Part I of the document and Recommendations for Parenteral Rabies Vaccination Procedures is Part II. Part III: Rabies Vaccines Licensed and Marketed in the U.S., 2005 has been updated. The following feline combination vaccine products are no longer available: IMRAB 3 + Feline 3; IMRAB 3 +Feline 4; PUREVAX Feline 3/ Rabies+LEUCAT; ECLIPSE 3 + FeLV/R; ECLIPSE 4+FeLV/R; Fel-O-Guard 3+ FeLV/R; and Fel-O-Guard 4+FeLV/R.

The definition of a rabies exposure in Part I.A.1. has been clarified and a new sentence is added to direct questions concerning possible rabies exposures to local and state public health authorities.

During 2004, there were two recognized importations of rabid dogs into the United States, one from Puerto Rico (mongoose rabies variant that is readily transmitted dog-to-dog) and one from Thailand (canine rabies virus variant). The practice of importing dogs from areas with ongoing dog-to-dog rabies transmission for the purpose of adoption or sale poses a risk to individuals handling and adopting the dogs and it could reintroduce canine-transmitted rabies to the United States. A new section (c) was added to Part I.B.3. to call for the discontinuation of this practice.

The management of unvaccinated dogs, cats and ferrets that undergo a 180-day isolation period after a rabies exposure has always included vaccination one month prior to release in order to assure that the animal is currently immunized when the isolation period is completed. Part I.B.5.(a) was expanded to allow for rabies vaccination either on entry into the 6 month isolation period, or 1 month prior to release from isolation. Vaccine alone, administered to a previously unvaccinated animal after a rabies exposure, will not effectively prevent rabies from developing from that exposure. However, the committee decided that vaccinating the animal on entry could provide a measure of immunity in the event that a wild animal gained access to the isolation pen (e.g. bat enters through wire, skunk burrows under fencing) during the 180-day isolation period. Veterinarians, animal control officials, and local health authorities should assure that regardless of when the vaccine is administered, there is no change in the management or length of the isolation procedures. A sentence was added to direct reports of illness in isolated or confined animals to local health departments.

Dogs, cats and ferrets are confined for 10 days of observation after biting humans to assure that changes in health or behavior that might indicate the onset of rabies will be recognized and evaluated rapidly. The vast majority of animals that undergo a 10-day confinement and observation period remain healthy and no further action is required. Part I.B.6.(a) has new language explaining that the rationale for not administering rabies vaccine to animals during the 10-day observation period is to avoid confusing possible signs related to the administration of the vaccine (e.g. transient lameness, lethargy, lack of appetite) with early non-specific signs of rabies. This helps to prevent unnecessary euthanasia and testing of animals, and needless administration of PEP to bitten persons.

In Parts I.C.1. and II.D. concerning rabies control programs for wildlife reservoirs of rabies, a sentence was added about integrating trap-vaccinate and release programs when appropriate into certain oral vaccination programs.

It has come to the attention of the committee that there is a lack of recognition by many persons that it takes 28 days from the time of the initial rabies vaccination for immunity to develop. Veterinarians should insure that their staffs and clients are aware of this time lag so that clients can protect animals from potential rabies exposures during this time.

Additional references have been added to provide scientific support for information provided in the document.

RABIES UPDATES

Four fatal human rabies infections occurred in 2004 as a result of organ transplants with tissues harvested from a donor later found to have been infected with rabies. This is the first time that human-to-human transmission of rabies infection from organ donation (other than corneas) has been recognized (www.cdc.gov/mmwr/preview/mmwrhtml/mm5327a5.htm).

A fourteen year old girl in Wisconsin survived symptomatic rabies infection without receiving post exposure prophylaxis after a bat bite. This is the first recognized case of its kind in medical history.

With the recent epizootic of West Nile virus nationwide, there has been a dramatic increase in acute, fatal, neurological illnesses in animals, particularly horses. Infection with rabies and West Nile viruses are indistinguishable clinically. Anytime an animal dies or is euthanized due to an undiagnosed neurological illness, rabies should be considered to allow for appropriate public health testing and follow-up before disposal of the animal.

CDC's Rabies Laboratory is still interested in evaluating the potential for rabies transmission via milk from lactating animals. When rabies is suspected in a lactating animal, milk and mammary tissue should be collected and stored. If the animal tests positive, the milk and mammary tissue should be shipped on dry ice to:

Rabies Laboratory
DASH, Bldg. 4, Rm. B32
Centers for Disease Control and Prevention
1600 Clifton Road, NE
Atlanta, GA 30333
(404) 639-1050

Although an uncommon occurrence, rodents (particularly groundhogs), beavers, and lagomorphs are occasionally diagnosed with the raccoon variant of rabies virus in the Eastern U.S. In order to better evaluate the potential for these animals to transmit rabies, the Rabies Unit of CDC would like to receive the entire head of any rodent or lagomorph testing positive for rabies. Rabies diagnostic laboratories should store the heads of high suspect rodents and lagomorphs until testing is completed, and send the specimens to CDC at the above address for further analysis if results are positive.